



## PART B - FEE(S) TRANSMITTAL

002/003

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where applicable. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1. by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23125 7590 08/02/2005

FREESCALE SEMICONDUCTOR, INC.  
LAW DEPARTMENT  
7700 WEST PARMER LANE MD:TX32/PL02  
AUSTIN, TX 78729

08/11/2005 HDENESS2 00000008 503079 10668714

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Pat Thomas	(Depositor's name)
<i>Pat Thomas</i>	(Signature)
8-11-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/668,714	09/23/2003	Marius K. Orlowski	SCI2928TP	2214

TITLE OF INVENTION: METHOD FOR FORMING A SEMICONDUCTOR DEVICE HAVING ISOLATION REGIONS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MALDONADO, JULIO J	2823	438-400000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kim-Marie Vo

2 Michael P. Noonan

3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

FREESCALE SEMICONDUCTOR, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

AUSTIN, TEXAS

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 503079 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Kim-Marie Vo*

Date

Aug. 11, 2005

Typed or printed name

Kim-Marie Vo

Registration No. 50,714

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



## FACSIMILE

LAW DEPARTMENT  
FREESCALE SEMICONDUCTOR, INC.

DATE: August 11, 2005

TO: MS: ISSUE FEE (703) 308-6789  
(ADDRESSEE) (EXTENSION)

USPTO (703) 746-4000  
(LOCATION) (FAX NUMBER)

FROM: Pat Thomas for Robert King (512) 996-6839  
(SENDER) (EXTENSION)

TOTAL NUMBER OF PAGES 3 (including this page)

\*\*\*\*\*  
IF YOU HAVE ANY TROUBLE OR QUESTIONS WITH TRANSMISSION, OR HAVE RECEIVED IT IN  
ERROR, PLEASE CALL: (512) 996-6839  
\*\*\*\*\*

Docket No.: SC12928TP  
Applicant: Marius K. Orlowski et al.  
Serial No.: 10/668,714  
Art Unit: 2823  
Filed: September 23, 2003  
Class: 438-400000

## ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:

1.	x	1 page Facsimile Cover Sheet
2.	x	1 page PTOL-85B Issue Fee Transmittal (in duplicate)

Paid by Deposit Account 503079, Freescale Semiconductor, Inc: \$1700

If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account 503079, Freescale Semiconductor, Inc.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS  
BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE:

ON: 8.11.05  
Date

Pat Thomas  
Signature

FREESCALE LAW DEPARTMENT  
7700 W. PARMER LANE MD: TX32/PL02  
AUSTIN, TEXAS 78729  
Fax Number (512) 996-6854

**NOTICE:** This facsimile transmission may contain information that is confidential, privileged or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to legal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.